



Plans for the Visiting Professional

IN THE FALL of 1962, on a grant from the World Health Organization, I had the privilege of observing at firsthand public health problems in Mexico, Guatemala, Costa Rica, and Peru. Before I left home, I was told that my report should not tell who or what I saw but what I would do differently in my relationship to foreign visitors as a result of the experience.

The following suggestions for making visits to this country, Florida in particular, more helpful and satisfying to professionals from abroad, are the fruit of these events. This is not to say that there was not a great deal else that I learned from my hosts. Their dedication was inspiring, and many of their ideas and practices could well be tried with our own people. But this report is directed to our own customs and attitudes.

The suggestions do not apply to every visitor; nor do they include routine arrangements for housing or orientation to State and county health departments. They are to be regarded more or less as a checklist, to be employed or discarded with discriminatory judgment. In preparing these notes, I had in mind the concept that the visitor is probably a Latin in Florida on a travel grant or getting field experience following university study.

At the conclusion of my tour in each country, I conferred with my host on my tentative conclusions. I explained that these were my thoughts about what we might do to improve the experience of visitors from his country in the United States.

No criticism of my host was implied or inferred. To the contrary, the discussion frequently resulted in correcting my own misconceptions.

It should be recognized also that many of the suggestions are already in effect, although some of the ideas are an improvement on present practice and others are completely new.

★ In recognition of the importance of readiness in learning, visitors should receive, in advance if possible, a map, a short history of the locale, and a brief review of public health in the region.

★ Schedules should be relaxed: the visitor may not be accustomed to the local pace of operation. He is moreover often confused and distracted by strange sights and situations and needs time to adjust.

★ The visitor should always be provided with a place to regard as an operating base, where he may write, read, store materials, and receive calls and visitors.

★ If possible, it is a good idea to arrange for visits to homes, including the less prosperous ones. These calls may be especially appreciated after working hours, when visitors otherwise are often lonely.

★ Before the visitor is given information about American practice, give him a chance to describe public health programs in his own country. If the visitor has slides or photographs, arrange for a conference where he may show and discuss them. Some such participating role is especially useful if the visitor feels frustrated by being a mere observer. Listening to his remarks may help the host make American practice more meaningful. It will also help establish the fact that the different countries have much to contribute to each other, that cultural exchange is not a one-way street.

★ The visitor should have an opportunity to review the tentative prearranged schedule and to make suggestions for changes in emphasis.

Based on a report by Elizabeth Reed, director of the division of health education, Florida State Board of Health, to the World Health Organization following receipt of a travel fellowship to Mexico, Guatemala, Costa Rica, and Peru to observe public health administration practices.

★ Visitors may learn more from observing a few programs in depth than from a quick, superficial overview of many programs.

★ Programs studied should be in settings most comparable to the visitor's own background, but there should also be an opportunity to observe the range of situations, from a simple rural setting to a metropolitan complex. In the process, the visitor will appreciate an opportunity also to visit the renowned sights of the region.

★ It is important that visitors understand the educational and professional qualifications of those with whom they speak, so that they may be helped in evaluating the information offered.

★ If the visitor is not fluent in English, it is urgent that someone who speaks his language be available to help him in exploring the various aspects of public health policy and practice.

★ At the close of the tour, there should be an evaluation, and the visitor should be apprised well in advance of this obligation so that both the social and professional aspects of his visit can be discussed.

★ The visitor will not be interested in our table of organization, but will need to know that many programs originate at the point of need, that they do not necessarily follow the chain of command. The visitor also should have an opportunity to understand the activities and functions of voluntary organizations and the processes of coordinating programs of different jurisdictions. He may be impressed, for example, by the work of the 4-H clubs.

★ Since public assistance is usually linked with health work abroad, visitors will be interested in our welfare activities and will welcome opportunities to observe the procedures.

★ Visitors will enjoy the opportunity to take part in workshops, meetings, and seminars or other educational gatherings which use methods other than lectures.

★ Tours of water treatment plants, sewage disposal plants, and rural hospitals or urban health centers may be memorable events for a visitor. It is useful also to explain the relation of such activities to the work of the health department.

★ Opportunity should be given to emphasize principles of health education, particularly in relation to environmental sanitation and nutrition.

★ If the visitor is not a nurse, it is a good idea to explain the status of the nurse and to visit schools of nursing. Good maternal and child health programs and the supervision of untrained midwives can also be observed.

★ Accident prevention programs can be augmented with visits to safety councils.

★ If the visitor's homeland is plagued with patronage, a brief overview of the merit system may be useful.

★ Rehabilitation may be demonstrated by an explanation of the cooperative and coordinated role of several agencies.

★ Since the visitor is engaged in a form of continuing education, it may be encouraging for him to see other professionals involved in inservice training.

★ There should be enough of an opportunity to observe operational research to appreciate the principle and process. In this connection, it will also be appropriate to demonstrate an objective evaluation of public health programs, and to show how evaluation and research apply to long-range planning.

Ever since my work in the Amazon Valley almost 20 years ago, I have held the firm belief that ties among nations are best strengthened by the international ties of ordinary citizens. My latest experience has strengthened that belief. It has reminded me also that pride in our own nation is enhanced as we grow to appreciate what other cultures offer, and as we discern the common aspirations of all human beings.